Do not enter - KJ 12/5/2008

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In re application of: **Fisher et al.** Atty. Docket No.: **50N3695.01/1582**

Serial No.: **09/781,917**

Filing Date: **February 8, 2001**

Title: **System And Method For Accessing And Utilizing Ancillary Data With An Electronic Camera Device**

OIPE IAP22 NOV 28 2008 PATENT & TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[ ] Small entity status of this application under 37 CFR §§ 1.9 and 1.27 has been established by a verified statement previously submitted.

[ ] A verified statement to establish small entity status under 37 CFR §§ 1.9 and 1.27 is enclosed.

[X ] No additional fee is required.

The filing fee has been calculated as shown below:

| | (Col. 1) | | (Col. 2) | (Col. 3) | Small Entity | | or | Other Than a Small Entity | |
|---|---|---|---|---|---|---|---|---|---|
| | Claims Remaining After Amendment | | Highest Number Previously Paid For | Number of Extra Claims Present | Rate | Additional Fee | or | Rate | Additional Fee |
| Total | 59 | Minus | 59 | 0 | x $11 = | $0.00 | | X $ 50 = | $0.00 |
| Indep. | 5 | Minus | 5 | 0 | x $41 = | $0.00 | or | X $210 = | $0.00 |
| [ ] First Presentation of Multiple Dependent Claims | | | | | +$135 = | $0.00 | | +$0 = | $0.00 |
| | | | | | Total Fee | $0.00 | | Total Fee | $0.00 |

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

[ ] Please charge my Deposit Account No. 50-3367 in the amount of $_____. **A duplicate copy of this sheet is attached.**

[ ] Enclosed please find a credit card form for $_____for the additional claims.

[X ] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-3367. **A duplicate copy of this sheet is attached.**

[X ] Any filing fees under 37 CFR § 1.16 for the presentation of extra claims.

[X ] Any patent application processing fees under 37 CFR § 1.17.

Respectfully submitted,

Dated: 11/20/08

Gregory J. Koerner, Reg.No. 38,519
Redwood Patent Law
1291 E. Hillsdale Blvd., Suite 205
Foster City, CA 94404
Tel: (650) 358-4000
Fax: (650) 358-4085

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**IN THE**

**UNITED STATES PATENT AND TRADEMARK OFFICE**

| | |
|---|---|
| APPLICANT(S): | Fisher et al. |
| SERIAL NO.: | 09/781,917 |
| FILED: | February 8, 2001 |
| TITLE: | System And Method For Accessing And Utilizing Ancillary Data With An Electronic Camera Device |
| EXAMINER: | Jerabek, K. |
| ART UNIT: | 2622 |
| ATTY DKT NO: | 50N3695.01/1582 |

**CERTIFICATE OF MAILING**

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date printed below:

Date: 11/25/08

Gregory J. Koerner

**Response To Office Action**

Mail Stop AF
Commissioner for Patents
P.O Box 1450
Alexandria, Virginia 22313-1450

Dear Sir:

In response to the Final Office Action mailed September 30, 2008, please reconsider the above-identified Application in light of the following remarks and amendments.